

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
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EFS ID: 18046
Application ID: 10065131
Title of Invention: FOOD SURFACE SANITATION
HOOD
First Named Inventor: RONALD FINK
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2002-09-19
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: 65564816
Digital Certificate Holder: cn=Dale Paul DiMaggio., ou=Registered Attorneys, ou=Patent and
Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
Certificate Message Digest: UNuIVboh3kA9et8bmAXnDQ==
Total Fees Authorized: \$469.0
Payment Category: DA - Deposit Account
Deposit Account Number: 131130
Deposit Account Name: DALE PAUL DiMAGGIO

TRANSMITTAL FORM



Electronic Version 1.0.3

Stylesheet Version: 1.0

Attorney Docket
Number:

65564816

Submission Type: Utility Patent
Filing

FOOD SURFACE SANITATION HOOD

First Named Inventor: RONALD G FINK

SUBMITTED BY

Name: DALE PAUL DiMAGGIO ESQ.

Registration Number: 31823

Electronic Signature Mark: /dale
paul dimaggio/

Date Signed: 20020919

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

| | |
|------------------|---------------------|
| declaration | rgf_decl_1_0001.tif |
| declaration | rgf_decl_2_0001.tif |
| declaration | rgf_decl_3_0001.tif |
| bibd-transmittal | 65564816apds.xml |
| fee-transmittal | 65564816fee.xml |

specification

4816foodapplication.xml

Attached Image File(s):

rgf_decl_1_0001.tif

rgf_decl_2_0001.tif

rgf_decl_3_0001.tif

Comments:

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION
(English Language Declaration)

File No. 6556.4816

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FOOD SURFACE SANITATION HOOD, the specification of which (check one):

☒ is attached hereto

☐ was filed on _____ as Serial No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability, as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

| <u>Number</u> | <u>Country</u> | <u>Day/Month/Year</u> |
|---------------|----------------|-----------------------|
| NONE | | |

Priority Claimed

| <u>Yes</u> | <u>No</u> |
|------------|-----------|
| | |

I hereby claim the benefit under Title 35, United States Code 120, of any United States application(s) or PCT international application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code 112, I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations 1.56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Serial No.

NONE

Filing DateStatus

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith along with any and all foreign applications filed and foreign patents issued therefrom.

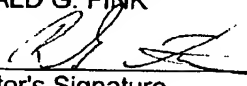
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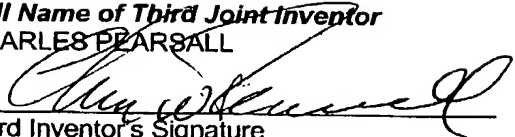


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I\6556\FORMS\4816 DECLARATION&POA

FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Independent Inventor

TOTAL FEES AUTHORIZED: \$ 469

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 131130

Deposit Account Name: MALIN HALEY & DiMAGGIO



SUBMITTED BY

Authorized Name: DALE PAUL DiMAGGIO

Electronic Signature Mark: /dale paul dimaggio/

Date Signed: 20020919

BASIC FILING FEE

| Fee Description | Fee Code | Fee Paid |
|--------------------|----------|----------|
| Utility Filing Fee | 201 | \$ 370 |

Subtotal For Basic Filing Fee: \$ 370

EXTRA CLAIM FEES

| | Fee Code | Fee | Extra Claims | Fee Paid |
|-----------------------|----------|-------|--------------|----------|
| Total Claims: 31 | 203 | \$ 9 | 11 | \$ 99 |
| Independent Claims: 3 | 202 | \$ 42 | 0 | \$ 0 |

Subtotal For Extra Claims Fees: \$ 99